

## **NELSON COUNTY FISCAL COURT**

OCCUPATIONAL LICENSE DIVISION

www.nelsoncountyky.com

PO Box 578

1 Court Square, Suite 202

Court Square, Suite 20 Bardstown KY 40004 (502) 348-1895 (502) 348-1897 fax FORM C-1

## OCCUPATIONAL LICENSE FEE RETURN ON NET PROFIT C-CORPORATIONS

S-Corporations and Partnerships - do not use. Please file Form SP-1

	Add Cha Coi Em	dress Change? ange in Ownership? ntract labor paid this year? (attach 1099's) aployees in Nelson County?	
Principal Business Activity			
Daytime Phone Number			
Federal ID Number	worksheet on page 2  Dicable from worksheet. If not applicable, enter 100%  Line 1 x Line 2  ved  15,000.00  4. This is your taxable income  (x (.005)  Int penalty  Int penalty  Strinclude copies of all applicable tax documents filed with the Internal Revenue Service.  20 or 1120A, pages 1-4; 1099-Misc  tities of perjury, that I have examined this document and to the best of my knoweledge and belief, e return.		
Adjusted Net Profit from worksheet on page 2		e e	
2) Apportionment % - if applicable from worksheet. If not applicable, enter 1009	%		
3) Apportioned Net Profit - Line 1 x Line 2		6.	
4) Maximum earnings allowed	15,000.00	e.	
5) Enter lesser of lines 3 or 4. This is your taxable income		e .	
6) Multiply line 5 x 1/2 of 1% (.005)			
7) Late filing and/or payment penalty			
10% of total tax on line 6			
8) Interest fee		-	
0.5% per month, 6% per annum - of total tax on line 6			
9) Tentative tax due - add lines 6, 7, and 8		\$	
10) Prepayments/Overpayments/Credits on Account, if applicable			
11) Total Tax Due (Subtract line 10 from line 9)		\$	
**Each filing entity MUST include copies of all applicable tax docume Corporations: Form 1120 or 1120A, pages 1-4; 1099-Misc	ents filed with the Internal Re	evenue Service.	
I declare, under the penalties of perjury, that I have examined this docume this is a true and accurate return.	ent and to the best of my knowe	eledge and belief,	
Signature of Corporate Officer Printed Name	Titl	le	Date
Signature of preparer (if other than taxpayer)	Date	Printed Name	

ADJUSTED NET PROFIT CALCULATION	CORPORATION
<ol> <li>Taxable income or (loss) per Federal Form 1120 or 1120A. Attach Form 1120/1120A, Pages 1-4</li> </ol>	
2) Add items not deductible:	
a) State or Local Taxes based on income	
b) License fee under this ordinance	
c) Capital Loss (fiduciary only)	
d) Net Operating Loss Carryover	
e) Other Items (list)	
3) TOTAL INCOME: ADD LINES 1-2  4) Subtract items not subject:  a) Interest on Corporate Bonds	
b) Royalties on Patents, Copyrights	
e) Dividends	
d) Net Capital Gain	
e) Other Items (list)	
5) TOTAL DEDUCTIONS - ADD LINES 4a-e	
6) ADJUSTED NET PROFIT - SUBTRACT LINE 5 FROM LINE 3. ENTER HERE AND ON APPLICABLE SECTION ON PAGE 1	

WORKSHEET: BUSINESS AI	PPORTIONMEN	T	
Use ONLY if a portion of revenue was earned outside	Nelson County during the yea	r	
	COLUMN A	COLUMN B	DIVIDE
	NELSON COUNTY	TOTAL EVERYWHERE	(A/B=C)
11) Revenue Factor - Total Sales/Receipts for the year			9/6